

**INVOLUNTARY ADMINISTRATIVE SEPARATION OF MARINES WITH  
POST-TRAUMATIC STRESS DISORDER (PTSD) AND/OR  
TRAUMATIC BRAIN INJURY (TBI)**

**Unit Legal Responsibility**

- ☐ MARINES SEPARATED UNDER THESE PROVISIONS SHALL BE DIRECTED TO CONSULT WITH A REPRESENTATIVE FROM THE DEPARTMENT OF VETERAN AFFAIRS REGARDING VETERAN BENEFITS AND SERVICES PRIOR TO SEPARATION WITH THAT COUNSELLING DATED AND SIGNED IN BLOCK 17 OF DD FORM 2648 (PRESEPARATION COUNSELING CHECKLIST)
- ☐ MEDICAL OFFICER EVALUATION IS ATTACHED TO CO'S SEPARATION LETTER TO GCMCA.

**Medical Providers Responsibility**

- ☐ MEDICAL PROVIDERS PERFORMING THESE EVALUATIONS SHALL ENSURE MARINES DIAGNOSED WITH OR WHO HAVE CONCERNING SYMPTOMS OF PTSD OR TBI WILL BE FURTHER EVALUATED BY APPROPRIATELY PRIVILEGED PHYSICIANS OR OTHER LICENSED MEDICAL PROFESSIONALS SUCH AS A CLINICAL PSYCHOLOGIST OR PSYCHIATRIST.
- ☐ PTSD AND TBI EVALUATIONS MUST SPECIFICALLY INCLUDE COMMENTS ON THE PRESENCE OR ABSENCE OF THESE CONDITIONS AND, IF PRESENT, THE EXTENT TO WHICH THEY AFFECTED THE MARINE'S JUDGMENT AND MAY HAVE BEEN A CONTRIBUTING FACTOR IN THE BASIS FOR SEPARATION.
- ☐ IF THE MEDICAL EVALUATION RESULTS IN A DIAGNOSIS OF PTSD OR TBI AND THE SEPARATION AUTHORITY DETERMINES IT IS SERVICE RELATED, SUFFICIENTLY MITIGATING, AND AMOUNTS TO A SIGNIFICANT DISABILITY, THE SEPARATION AUTHORITY SHOULD CONSIDER PROCESSING FOR SEPARATION UNDER CHAPTER EIGHT OF REFERENCE A FOR PHYSICAL DISABILITY. THESE PROCEDURES CONSTITUTE A CHANGE TO PARAGRAPH 8508 OF REFERENCE A.

**Separation Authority Responsibility**

- ☐ FOR THOSE CASES IN WHICH THE SERVICE CHARACTERIZATION IS DETERMINED TO BE GENERAL UNDER HONORABLE OR OTHER THAN HONORABLE, THE GCMCA'S SEPARATION ENDORSEMENT SHALL, IN LIGHT OF AN IDENTIFIED PTSD OR TBI CONTRIBUTING FACTOR, EXPLAIN THE REASONS FOR THE RESPONDENT'S SEPARATION AND THE CHARACTERIZATION OF SERVICE.

### Evaluation Options

- ☐ #1 - DD Form 2807-1, DD Form 2697 & Medical Officer Letter.
- ☐ #2 - SF 600 & Medical Officer Letter.
- ☐ #3 - PTSD/TBI checklist & Medical Officer Letter.

MEMORANDUM

From: Medical Officer, UNIT  
To: Commanding General, 2nd Marine Aircraft Wing  
Subj: SCREENING FOR POST-TRAUMATIC STRESS DISORDER (PTSD) AND  
TRAUMATIC BRAIN INJURY (TBI) AS PART OF THE INVOLUNTARY  
ADMINISTRATIVE SEPARATION OF **RANK FIRST MI. LAST**  
Ref: (a) MARADMIN 328/10  
Encl: (1) PTSD Checklist  
(2) TBI Checklist  
(3) SF600 (if applicable)

1. In accordance with the reference, SNM was evaluated prior to involuntary administrative separation. SNM completed a PTSD Checklist, enclosure (1) and a TBI Checklist, enclosure (2)

2. Upon my review of the medical records and enclosures, SNM **does/does not** meet the criteria for further medical evaluation for PTSD. Additionally, SNM **does/does not** meet the criteria for further medical evaluation for TBI. Further examination and evaluation was conducted with my comments and recommendations, enclosure (3).

\_\_\_\_\_  
MedO Sign, Print, Date

-----  
I received a copy of this letter on \_\_\_\_\_. I understand that I can request additional screening for PTSD/TBI and am encouraged to report any mental health concerns that I may have to medical personnel, a chaplain, or my chain of command.

\_\_\_\_\_  
SNM Sign, Print, Date

-----  
\*If further evaluation is required by Appropriate Privileged Physicians or Licensed Medical Professionals; they must comment on separate correspondence concerning:

\_\_\_\_ Presence or Absence of these conditions.

\_\_\_\_ The extent to which the presence or absence of the condition may have contributed in the Marine's judgment and may have been a contributing factor in the Basis for separation.



# PTSD CheckList – Military Version (PCL-M)

Patient's Name: \_\_\_\_\_ Date: \_\_\_\_\_

SSN: \_\_\_\_\_ Service: \_\_\_\_\_ Rank: \_\_\_\_\_

*Instruction to patient:* Below is a list of problems and complaints that veterans sometimes have in response to stressful military experiences. Please read each one carefully, put an "X" in the box to indicate how much you have been bothered by that problem in the last month.

No.	Problem or Complaint:	Frequency:				
		Not at all (1)	A little bit (2)	Moderately (3)	Quite a bit (4)	Extremely (5)
1.	Repeated, disturbing <i>memories, thoughts, or images</i> of a stressful military experience?					
2.	Repeated, disturbing <i>dreams</i> of a stressful military experience?					
3.	Suddenly <i>acting or feeling</i> as if a stressful military experience <i>were happening again</i> (as if you were reliving it)?					
4.	Feeling very upset when something reminded you of a stressful military experience?					
5.	Having <i>physical reactions</i> (e.g., heart pounding, trouble breathing, or sweating) when <i>something reminded</i> you of a stressful military experience?					
6.	Avoid <i>thinking about or talking about</i> a stressful military experience or avoid <i>having feelings</i> related to it?					
7.	Avoid <i>activities or talking about</i> a stressful military experience or avoid <i>having feelings</i> related to it?					
8.	Trouble <i>remembering important parts</i> of a stressful military experience?					
9.	Loss of <i>interest</i> in things that you used to enjoy?					
10.	Feeling <i>distant or cut off</i> from other people?					
11.	Feeling <i>emotionally numb</i> or being unable to have loving feelings for those close to you?					
12.	Feeling as if your <i>future</i> will somehow be <i>cut short</i> ?					
13.	Trouble <i>falling or staying</i> asleep?					
14.	Feeling <i>irritable</i> or having <i>angry outbursts</i> ?					
15.	Having <i>difficulty</i> concentrating?					
16.	Being " <i>super alert</i> " or watchful on guard?					
17.	Feeling <i>jumpy</i> or easily startled?					

PCL-M for DSM-IV (11/1/94)

Weathers, F.W., Huska, J.A., Keane, T.M. PCL-M for DSM-IV. Boston; National Center for PTSD – Behavioral Science Division, 1991.

This is a Government document in the public domain.

## TBI CHECKLIST

Patient's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Last 4# SSN: \_\_\_\_\_ Service: \_\_\_\_\_ Rank: \_\_\_\_\_

*Instructions to patient:* Below is a list of problems and complaints that veterans sometimes have in response to brain injuries.

**If you never suffered any traumatic brain injury, Sign here:** \_\_\_\_\_

Please rate the following symptoms with regard to how much they have disturbed you since your injury.

- 0 = None- Rarely if ever present; not a problem at all.  
 1 = Mild- Occasionally present, but it does not disrupt activities; I can usually continue what I'm doing; doesn't really concern me.  
 2 = Moderate- Often present, occasionally disrupts my activities; I can usually continue what I'm doing with some effort; I feel somewhat concerned.  
 3 = Severe- Frequently present and disrupts activities; I can only do things that are fairly simple or take little effort; I feel like I need help.  
 4 = Very Severe- Almost always present and I have been unable to perform at work, school or home due to this problem; I probably cannot function without help.

No.	Problem or Complaint	Frequency:				
		0 None	1 Mild	2 Moderate	3 Severe	4 Very Severe
1.	Feeling Dizzy:					
2.	Loss of balance:					
3.	Poor coordination, clumsy:					
4.	Headaches:					
5.	Nausea:					
6.	Vision problems, blurring, trouble seeing:					
7.	Sensitivity to light:					
8.	Hearing difficulty:					
9.	Sensitivity to noise:					
10.	Numbness to tingling on parts of body:					
11.	Change in taste and/or smell:					
12.	Loss or increase of appetite:					
13.	Poor concentration or easily distracted:					
14.	Forgetfulness, can't remember things:					
15.	Difficulty making decisions:					
16.	Slowed thinking, can't finish things:					
17.	Fatigue, loss of energy, easily tired:					
18.	Difficulty falling or staying asleep:					
19.	Feeling anxious or tense:					
20.	Feeling depressed or sad:					
21.	Irritability, easily annoyed:					
22.	Poor frustration tolerance, overwhelmed:					



REQUIREMENTS FOR MEDICAL EVALUATION OF MARINES BEFORE INVOLUNTARY ADMINISTRATIVE SEPARATION

Date Signed: 6/10/2010

MARADMIN Active Number: 328/10

R 091030Z Jun 10

UNCLASSIFIED//

MARADMIN 328/10

MSGID/GENADMIN/CMC WASHINGTON DC MRA MM//

SUBJ/REQUIREMENTS FOR MEDICAL EVALUATION OF MARINES BEFORE INVOLUNTARY ADMINISTRATIVE SEPARATION//

REF/A/MSGID:DOC/MCO P1900.16F /-//

REF/B/MSGID:DOC/NAVMED P-117, CHAPTER 15/-//

REF/C/MSGID:DOC/MARADMIN 283-06 /-//

NARR/REF A IS THE MARCORSEPMAN AND GUIDANCE FOR ADMINISTRATIVE SEPARATIONS. REF B IS MANUAL OF THE MEDICAL DEPARTMENT GUIDANCE FOR MEDICAL EVALUATION. REF C PROVIDES GUIDANCE ON DEPLOYMENT AND POST DEPLOYMENT HEALTH ASSESSMENTS.//

POC/L. A. BENNETT /-/-/TEL:DSN 278-9322/TEL:(703) 784-9322//

POC/L. HEEREN/-/-/TEL:DSN 278-9323/TEL:(703) 784-9323//

POC/GARY RICHARDSON /MR/-/-/TEL:DSN 278-9309/TEL:(703) 784-9309//

POC/R. ADAMS /CAPT/-/-/TEL:DSN 278-9308/TEL:COMM (703) 784-9308//

GENTEXT/REMARKS/1. THIS MARADMIN SUMMARIZES COMMAND REQUIREMENTS BEFORE INVOLUNTARY ADMINISTRATIVE SEPARATION OF MARINES AND COMPLIES WITH NDAA FY10 SECTION 512 FOR CASES INVOLVING POST-TRAUMATIC STRESS DISORDER (PTSD) AND TRAUMATIC BRAIN INJURY (TBI).

2. GENERAL. THE MARINE CORPS REMAINS FULLY COMMITTED TO THE COMPREHENSIVE CARE AND TREATMENT OF OUR WOUNDED, ILL AND INJURED WARRIORS WHO ARE EXPECTED TO MAINTAIN THE SAME HIGH STANDARDS OF GOOD ORDER AND DISCIPLINE THAT THE NATION EXPECTS OF ALL MARINES, REGARDLESS OF THEIR MEDICAL STATUS. ALL LEADERS, COMMANDERS AND GENERAL COURT MARTIAL CONVENING AUTHORITIES (GCMCA) PLAY CRUCIAL ROLES THAT BALANCE THE WELFARE OF THE INDIVIDUAL MARINE WITH GOOD ORDER, DISCIPLINE AND MISSION ACCOMPLISHMENT.

3. PRIOR TO APPROVING ANY INVOLUNTARY ADMINISTRATIVE SEPARATION INITIATED UNDER THE PROVISIONS OF REFERENCE A FOR MARINES WITH MORE THAN 180 DAYS OF ACTIVE DUTY, THE SEPARATION AUTHORITY MUST ENSURE THAT A MEDICAL EVALUATION OF THE MARINE IS PERFORMED PER REFERENCES B AND C AND MUST REVIEW THE RESULTS OF THAT EVALUATION. THESE MEDICAL EVALUATIONS SHALL BE COMPLETED BY MEDICAL PROVIDERS AUTHORIZED TO PERFORM SEPARATION EVALUATIONS AND SHALL BE SUFFICIENT IN SCOPE AND TIMING TO MEET SEPARATION MEDICAL REQUIREMENTS. THE INTENT OF PERFORMING THESE EVALUATIONS IS TO ENSURE THAT SEPARATION AUTHORITIES HAVE ALL PERTINENT INFORMATION ABOUT ANY MEDICAL CONDITIONS THAT MAY HAVE A MATERIAL IMPACT ON A MARINES BEHAVIOR, ESPECIALLY ANY MARINE WHO HAS OR REASONABLY ALLEGES TO HAVE A TRAUMATIC BRAIN INJURY OR POST TRAUMATIC STRESS DISORDER. INHERENT IN ANY SEPARATION ACTION IS THAT AUTHORITY'S DISCRETION TO DIRECT ADDITIONAL MEDICAL TREATMENT AND DETERMINE THE DATE OF SEPARATION OR DIRECT RETENTION AS APPROPRIATE.

4. THE SEPARATION AUTHORITY FOR ENTRY LEVEL MARINES OR SELECTED MARINE CORPS RESERVE (SMCR) MARINES WITH NO HISTORY OF COMBAT SERVICE OR DEPLOYMENT WILL BE EXEMPT FROM REVIEWING THE FINAL MEDICAL EVALUATION; HOWEVER, THE COMMANDER INITIATING SEPARATION WILL BE REQUIRED TO CERTIFY THAT THESE MARINES HAD NO COMBAT SERVICE OR DEPLOYMENT AND WERE NOT DIAGNOSED WITH PTSD OR TBI. THE FINAL MEDICAL EVALUATION WILL ALSO BE EXEMPTED IN INSTANCES WHERE SMCR MARINES HAVE A HISTORY OF COMBAT SERVICE OR DEPLOYMENT, ARE UNDERGOING ADMINISTRATIVE SEPARATION PROCEEDINGS AND DO NOT RESPOND TO NOTIFICATION AND OTHER REQUIREMENTS FOR ADMINISTRATIVE SEPARATION.

5. MEDICAL PROVIDERS PERFORMING THESE EVALUATIONS SHALL ENSURE MARINES DIAGNOSED WITH OR WHO HAVE CONCERNING SYMPTOMS OF PTSD OR TBI WILL BE FURTHER EVALUATED BY APPROPRIATELY PRIVILEGED PHYSICIANS OR OTHER LICENSED MEDICAL PROFESSIONALS SUCH AS A CLINICAL PSYCHOLOGIST OR PSYCHIATRIST. PTSD AND TBI EVALUATIONS MUST SPECIFICALLY INCLUDE COMMENTS ON THE PRESENCE OR ABSENCE OF THESE CONDITIONS AND, IF PRESENT, THE EXTENT TO WHICH THEY AFFECTED THE MARINE'S JUDGMENT AND MAY HAVE BEEN A CONTRIBUTING FACTOR IN THE BASIS FOR SEPARATION. FOR THOSE CASES IN WHICH THE SERVICE CHARACTERIZATION IS DETERMINED TO BE GENERAL UNDER HONORABLE OR OTHER THAN HONORABLE, THE GCMCA'S SEPARATION ENDORSEMENT SHALL, IN LIGHT OF AN IDENTIFIED PTSD OR TBI CONTRIBUTING FACTOR, EXPLAIN THE REASONS FOR THE RESPONDENT'S SEPARATION AND THE CHARACTERIZATION OF SERVICE.

6. IF THE MEDICAL EVALUATION RESULTS IN A DIAGNOSIS OF PTSD OR TBI AND THE SEPARATION AUTHORITY DETERMINES IT IS SERVICE RELATED, SUFFICIENTLY MITIGATING, AND AMOUNTS TO A SIGNIFICANT DISABILITY, THE SEPARATION AUTHORITY SHOULD CONSIDER PROCESSING FOR SEPARATION UNDER CHAPTER EIGHT OF REFERENCE A FOR PHYSICAL DISABILITY. THESE PROCEDURES CONSTITUTE A CHANGE TO PARAGRAPH 8508 OF REFERENCE A.

7. MARINES SEPARATED UNDER THESE PROVISIONS SHALL BE DIRECTED TO CONSULT WITH A REPRESENTATIVE FROM THE DEPARTMENT OF VETERAN AFFAIRS REGARDING VETERAN BENEFITS AND SERVICES PRIOR TO SEPARATION WITH THAT COUNSELING DATED AND SIGNED IN BLOCK 17 OF DD FORM 2648, PRE-SEPARATION COUNSELING CHECKLIST.

8. THIS POLICY DOES NOT PROVIDE AN ADDITIONAL PROCEDURAL BASIS OF APPEAL OR REDRESS FOR RESPONDENTS. THE MEDICAL EXAMINATION PROCEDURES REQUIRED IN THIS MARADMIN DO NOT APPLY TO COURT-MARTIAL OR OTHER PROCEEDINGS CONDUCTED PURSUANT TO THE UNIFORM CODE OF MILITARY JUSTICE

9. THE NEXT CHANGE TO REF A WILL INCLUDE THESE REQUIREMENTS.

10. RELEASE AUTHORIZED BY MAJGEN A. SALINAS, DIRECTOR, MANPOWER MANAGEMENT DIVISION.//